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This service is for general distribution of information and news to Sailors and Marines and their families, civilian employees, and retired members of the Navy and Marine Corps and their families. Further dissemination of this information is encouraged.

Stories for this week are:

Telemedicine Saves Accident Victim Painful Trip
Orthopedic Clinic Takes Care to Kids
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Headline: Telemedicine Saves Accident Victim Painful Trip

Imagine you're on an aircraft carrier in the Arabian Gulf, thousands of miles from your homeport, and you are seriously injured. Now you're being told that you are going to be strapped to a backboard, placed on an aircraft and catapulted off the back of the carrier so a specialist stateside can take a look at you.

Aaaagh!!

Sounds painful, right? Well, that's how most cases were treated until recent technologies changed the boundaries of health care.

The use of telemedicine to move information, rather than patients, saves time and money for the Navy. Take a case that recently occurred aboard USS ENTERPRISE. A young Sailor suffered head and neck injuries while performing aircraft maintenance in the ship's hangar bay. Immediately x-rays were taken and reviewed on the ship, but there was still concern about a possible neck fracture.

The x-rays were then digitized and transmitted to National Naval Medical Center Bethesda in Maryland. Within 30 minutes a telephonic report via satellite was made from the radiology department at Bethesda to the senior medical

officer (SMO) onboard the ENTERPRISE. The Sailor did not have a neck fracture.

The patient was observed overnight and the next morning physicians and a dentist from Bethesda discussed the patient's case with the ship's oral surgeon and SMO via teleconference.

"We are now able to provide forward-deployed Sailors the access to our very best specialists ashore, and at sea is exactly where these skills are needed most," said CDR Charles Barker, MC, SMO aboard the ENTERPRISE. "The quality of care we are now able to offer Sailors at the deckplates and the savings we have realized in medevac transfers and lost work hours have far exceeded our expectations."

Without telemedicine capabilities, the Sailor would have been strapped down and flown to the nearest medical facility for an urgent CT scan. The use of teleradiology not only saved the ship thousands of dollars in an avoided medevac and scan but also saved the Sailor a long painful flight.

By LT Edie Rosenthal, Bureau of Medicine and Surgery

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Headline: Orthopedic Clinic Takes Care to Kids

Virginia Beach, VA--The pediatric orthopedic surgeons, physical therapists, and other specialists were lured from their offices and examining rooms by promises of doughnuts, coffee, and children's smiles.

They got all three.

In exchange, they set up a full-fledged orthopedic clinic on the fly--right in the heart of an elementary school.

The team was from Naval Medical Center Portsmouth, VA, and according to pediatric orthopedic surgeon, LCDR Anthony Lapinsky, MC, they were making an "orthopedic house call" to Pembroke Elementary School in Virginia Beach, a school that houses a large special needs population. The monthly clinic is available to military family members throughout the area.

Bringing the medical professionals to children, instead of the other way around, offers a coordinated, team-centered approach to the multitude of problems some of these children have, Lapinsky explained. It also, surprisingly, lets doctors conduct more thorough examinations than in the doctor's office.

For example, instead of trying to evaluate 2-year-old Melissa Pethel's motor skills in a small examining room at the naval hospital, Lapinsky watched the toddler push a plastic shopping cart around a much larger space.

Another benefit of the on-site clinic is that the children, most of whom attend Penbroke, remain in their normal setting. There's nothing to make them tense or uncooperative, no antiseptic smells, strangers in white coats, or bad memories of coming to the hospital for surgeries.

It also couldn't be handier for the parents of these special children.

"It helps me out a lot," said Vickie Lemaster. Instead of taking a half day off to bring her 2-year-old into the Portsmouth hospital, she can stop in on her way to work.

Lapinsky said that the school-based clinic is a prime example of Navy Medicine's initiative to take health care to the patients--to the deckplates--rather than have patients always come to them.

"You can't get any closer to children than school," he said.

By Debra Gordon, The Virginian-Pilot

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Headline: Navy Doc Helps Save Life Via Internet

Ann Landers and her readers have been imparting wisdom and information to the public for decades. So it's no surprise that her column provides this story about a Navy doctor who reached across cyberspace to help save a woman's life.

Back in 1994, a 21-year-old Chinese woman was suffering from abdominal pain and hair loss. She was treated with traditional Chinese therapy, and seemed to recover. However, a few months later, she was hospitalized with a variety of central nervous system complaints, and lapsed into a coma.

Her doctors performed a battery of tests, but the woman didn't respond. Her fellow students at Beijing University were concerned about her, and send out e-mail over the Internet, describing her symptoms and asking for help.

The first person to respond was CAPT Stephen O. Cunnion, MC, an infectious disease specialist at the Uniformed Services University of the Health Sciences in Bethesda, MD. Cunnion was a chemist before he became a physician, and knew that it wasn't a viral infection when he heard the woman had lost her hair a second time.

"That gave me the lead to thallium, and it all fit," said Cunnion.

Fortunately for the young woman, Cunnion once worked in a lab where one his co-workers contracted thallium poisoning. The symptoms were identical.

During the next four weeks, more than 2,000 people responded to the students' plea, and more than 80 people supported Cunnion's diagnosis.

The students took this information to the young woman's mother, who then took hair and other samples to a nearby public health laboratory. It conducted tests that confirmed thallium poisoning.

"I still keep in touch with her friends through the Internet," said Cunnion. "She's been treated and has shown improvement."

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Headline: ENTERPRISE Nutritionist Trims Fat

USS ENTERPRISE--LT Brenda Adams, MSC, dietitian, has been on board USS ENTERPRISE (CVN 65) just months, but already she's making a healthful difference.

Down on the chow line, there's a sign that's posted near each food item, showing the fat and calorie count for each. Meat loaf for dinner? 573 calories. Top it off with gravy, and it's an additional 208 calories. And that corned beef hash for breakfast? 13 grams of fat. According to the soon-to-be-released Navy Nutrition and Weight Control Self-Study Guide, most male Sailors should limit their fat intake to about 66 grams of fat, so that single serving of hash was nearly 20 percent of the daily fat allowance.

Adams, who normally is assigned to the Naval Medical Center in Portsmouth, VA, is on board ENTERPRISE to help Sailors make healthy choices when it comes to food, but also to perform some research.

Adams is carrying on a research project designed by CAPT Karen Dennis, NC, a Naval Reservist and assistant professor at the University of Maryland at Baltimore. Dennis' research is designed to learn whether Sailors' attitudes and behaviors toward food and exercise at sea could be changed by counseling alone. Early indications seem to be that they can.

Every week, Adams meets with 21 Sailors on the ship to talk about food choices and exercise. The group members, who range in age from 23 to 40 and rank from seaman to master chief, have lost a total of 370 pounds--an average of 18 each--since the study began in July. She doesn't require the group to exercise or eat at the salad bar, but she does talk to the group members about portion control and food choices. And the group members--none of whom met physical fitness and body-fat standards in August--have been supporting one another in efforts to lose weight and shape up, Adams said.

Adams has sympathy for the Sailors who are struggling to get and keep fit.

"It's kind of hard to eat low fat here, because fat is added to a lot of food," said Adams.

It's also tough because time often works against Sailors. They frequently don't have time to wait in long food lines, so they skip over to the quicker fast food lines that generally serve foods higher in fat and calories. Additionally, Sailors often use meal times as a social outlet, which often leads to trips to the dessert bar or "seconds".

Eating right can also be a challenge because getting the right foods to the ship can be hard.

"We pull up to the supply (replenishment ship) and if they don't have fresh vegetables, we don't get any," Adams said. She said she's seen fresh bananas only three times since June.

When the test ends in December, Adams will compare the starting and ending weights and body-fat levels of her treatment group and a control group that didn't receive her counseling. The groups will be tested again in April and

October to see what happened to members' weights and fitness levels.

"I think we're going to show that a long-term (behavior weight loss) program will work in the fleet," said Adams.

By Cindy Elmore, Stars & Stripes (Europe)

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Headline: Groton Helps Cities Combat "Skeeter" Scare

Groton, CT--NH Groton's preventive medicine department was honored recently for its help with a potentially dangerous situation for the citizens of the community.

Groton's Ledge Light Health District bought lunch for LT David Florin, MSC; LT Rohini Suraj, MSC; HM1(FMF) Marvin Mumbulo; HM2(FMF) Richard Schloendorn; and HM3 Robert Debord to thank them for their help in combating an infestation of mosquitoes that might have been carrying the Eastern equine encephalitis virus. The virus can cause a flu-like disease, which includes such symptoms as headache, stiff neck and nausea.

With state resources already expended beyond capacity, and with the crisis so threatening that Governor John G. Rowland declared a state of emergency, NH Groton's preventive medicine department pitched in to help. The staff implemented a mosquito surveillance program, obtaining and setting mosquito traps to gather the insects for testing. Additionally, Florin, head of the department, acted as an advisor to local officials about the hazards of the virus to the general public. He also prepared informational articles for publication to keep base residents informed about the disease.

Fortunately, no infected mosquitoes were discovered, and cooler weather eliminated the threat.

According to Mary Jane Engle, Ledge Light's health director, "This is just one example of the relationship Navy preventive medicine strives to have with the community." This gratitude was echoed by the health department of nearby New London, which also received assistance from the NH staff.

by LT T. L. Kennedy, MSC, NH Groton

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Headline: Campaign Safe and Sober Kicks Off in December

December is National Drunk and Drugged Driving Prevention month. Statistics show that impaired driving is at its peak during December, and young adult male drivers ages 21 to 34 are involved in the highest number of impaired driving crashes.

For more information and to receive a campaign kit that includes posters, fact sheets, and hints on how to spot an impaired driver, contact the Naval Safety Center at e-mail ltachha@safecen.navy.mil or wcosby@safecen.navy.mil; fax (757) 444-6044 or DSN 564-6044; or call (757) 444-3520 or DSN 564-6044, ext. 7134, 7135, or 7138.

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Headline: Corpsman Sings Anthem at Monday Night Football

San Diego--On Veteran's Day, San Diego's Jack Murphy Stadium hosted their annual All Military Night for the nationally-televised Monday Night Football game. For the first time in the history of the "Murph," a Navy Sailor opened the game by singing the national anthem.

HM2 Jason D. O'Byrne, a 26-year-old cardiovascular technician stationed at Naval Hospital (NH) Camp Pendleton, CA, was one of more than a hundred military members who competed to sing at the stadium. Finalists were judged on personal appearance, knowledge of lyrics, talent, stage performance, and self image.

"Singing the National Anthem at the Charger's game was unlike anything I've ever experienced," O'Byrne said. "Besides my wedding day, it was the most exciting moment of my life."

By Ann Severy, NH Camp Pendleton

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Headline: Healthy Lifestyles Forum Held

The Bureau of Naval Personnel's (BUPERS) Healthy Lifestyles Forum will be held via video-teleconference on Monday, 25 November, from noon to 4 p.m. Eastern Standard Time.

Navy health care professionals, including fitness coordinators, alcohol treatment facilities staff, and drug and alcohol advisors, are invited to participate.

Topics include holiday safety program resources information, Port Hueneme MWR "Bee Fit" overview, and the new Navy weight control manual update. There will also be an opportunity for questions and discussion.

The forum is offered through the Chief of Naval Education and Training's Electronic Schoolhouse Network, an electronic system that links various sites throughout the country and allows students to see and speak to the moderator and other participants via a television monitor. To locate a training site with video-teleconferencing capabilities near you, contact LT Leslie Cox, MSC, BUPERS, at (703) 695-4058.

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Headline: TRICARE Question and Answer

Q1. When is TRICARE coming to Region 1? Regions 2 and 5? When will beneficiaries in those regions get more information about it?

A. TRICARE will be coming to Region 1, which includes Maine, New Hampshire, Vermont, Massachusetts, Connecticut, Rhode Island, Delaware, Maryland, New Jersey, New York, Pennsylvania, the District of Columbia, and part of Northern Virginia, in November 1997. It was originally scheduled to be implemented in August 1997.

TRICARE will come to Region 2, which includes North

Carolina and most of Virginia, and Region 5, which includes Michigan, Wisconsin, Illinois, Indiana, Ohio, Kentucky, and West Virginia, in December 1997. These regions were originally scheduled to be implemented in August 1997.

A comprehensive education program about TRICARE usually begins about six months before it is implemented in a region, which is shortly after the health care contract is awarded to a qualified organization.

If you have a TRICARE question, the Bureau of Medicine and Surgery now has a dedicated e-mail address so that you can send in your questions and get a response via MEDNEWS. The address is TRICARE@bms200.med.navy.mil.

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Headline: Healthwatch: Trans-Fatty Acids: The New Health Danger?

First you were told to watch out for cholesterol, and saturated fats because they contain cholesterol.

Now, its trans-fatty acids.

Trans-fatty acids are contained in fat that occurs naturally in such foods as beef, butter, (whole) milk, and lamb. It also occurs in commercially prepared foods, such as margarine and shortenings, which is in turn often used in baking and frying. Some bread spreads that contain shortenings, such as peanut butter, may also contain trans-fatty acids.

While margarine and shortenings may have higher amounts of heart-healthy unsaturated fats than saturated-fat-rich butter, they still may contain trans-fatty acids. Some studies have founds these acids raise blood cholesterol levels as much as saturated fats.

While the final results aren't in, most nutritionists recommend individuals follow a healthy heart eating plan and take extra steps to avoid foods that contains tran-fatty acids and saturated fats.

Here are a few hints to reduce them in your diet:

--Avoid deep-fried foods. Look for lower-fat chips, crackers, cookies, pastries, processed foods, and margarine.

--Look for foods that contain no "vegetable shortening" or "partially hydrogenated" oil. Even though they may be from a vegetable source, they still may contain trans-fatty acids.

--Use olive or canola oil instead of butter, margarine or shortening. Use tub margarine in place of sticks. As a general rule, the harder the fat, the more trans-fatty acids a fat or oil contains.

--Look for food labeled "saturated-fat free."

And remember, most nutritionists recommend you limit your general fat intake to about 30 percent of your caloric intake per day.

By LT Kristen Moe, MSC, Naval Hospital Charleston, SC

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Feedback and comments are welcome. Story submissions

are encouraged. Contact Jan Davis, MEDNEWS editor, at e-mail address mednews@bms200.med.navy.mil, telephone 202/762-3223, DSN 762-3223, or fax 202/762-3224.